



Sports

## "BUILDING & CHAMPION"

# FALL BASKETBALL TRAINING '2024

**Come train at North Jersey's #1 basketball training facility (Bethany Community Center)!** TWYF Sports Elite trainers and coaches are some of the most experienced and most highly regarded professionals in the industry.

**About The BAC Training:** Our "Building A Champion" Fall program consists of competitive training sessions for boys and/or girls Youth Athletes. For those as young as 7 – 14 years old who are interested and motivated in learning and improving their basketball skills or their speed, explosiveness or conditioning.

### **<u>'2024 FALL Basketball TRAINING Program SCHEDULE</u></u>**

### September 17<sup>th</sup> – October 29th 8 Weeks / 1 Hr Sessions

1) Skills Development Training for Boys & Girls Youth Athletes Work on ballhandling, shooting, passing, rebounding, speed, defending & footwork. Fullcourt Scrimmage games in weeks 7 & 8.

 $3^{rd} - 5^{th}$  Grade Youth Athletes: Tuesdays 6 pm – 7 pm

 $6^{th} - 8^{th}$  Grade Youth Athletes: Tuesdays 7 pm – 8 pm

### 8 Sessions / \$280 ...... 1 Session / \$40

Optional: "Building A Champion" Basketball T-Shirt (\$15)

**For General Information:** Coach Carl "C-Dub" (201) 878-8385, www.teamwinfree.org or email: twyfsports@gmail.com

# The Best Trainers in the Best Facility!



**"BUILDING A CHAMPION" BASKETBALL** 



#### **2024 FALL BASKETBALL TRAINING PROGRAM REGISTRATION FORM**

Parent's Name:						
Address:		City		Zip		
lome Phone Cell		Email:				
Athlete's Name:		DOB	Grade	T-Shirt Size	e	
School:	Program	ו:	Fall ( ) Winte	er()Time:	Fee:	
Athlete's Name:		DOB	Grade	T-Shirt Size	e	
School:	ool: Program		Fall ( ) Winter ( ) Time: Fee:		Fee:	
Athlete's Name:		DOB	Grade	T-Shirt Size	e	
School:	Program	:	_ Fall ( ) Winter (	) Time:	Fee:	
Sibling Discount: Regular fee I	ess \$25 discount. Applies	to both siblings at	tending our basketb	all program withi	n the same session.	
By submitting this form, I am r that my child is participating a responsible for any damage or of my child's participation on y includes any testimonials that	t his/her own risk and the nijury that my child may your website and other T	at I am responsible cause. I also agree eam Winfree Youth	for any illness, injur that you may utilize	y or loss that may e video, photogra	y occur. I am also phs and information	
Payment can be made via:						
() Credit Card () Check (	) Cash					
() Mastercard () Visa Pa	yPal() Cash App()	Zelle ( ) Venmo	o() Apple Pay()			
Name on Card	me on Card Card Nu		umber		Exp Date:	
Security Code Bill	ing Address					
Cardholder Signature						



Make Checks payable to "Team Winfree Youth Foundation" and mail or bring to:

Bethany Community Center 605 Pascack Rd Washington Township, NJ 07676